### MSRP ANNUAL REPORT - Public Complex

You have completed the Annual Report submittal process. You may print or save a copy of this submittal report for your records.

Service ID:

1082787

Facility Name:

PASSAIC CNTY COMM COLLEGE PUBLIC SFTY ACADY

**Reporting Period:** 

January 1, 2019 through December 31, 2019

NJPDES Permit #:

NJG0151858

**Activity ID:** 

DST180001

#### Contacts

Name:

Brian Egan

Title:

**Executive Director of Plant Operations** 

Contact Type:

Stormwater Coordinator

**Organization Name:** 

PASSAIC CNTY COMMUNITY COLLEGE

**Organization Type:** 

County

E-Mail:

began@pccc.edu

Phone:

(973) 684-5843 (Fax Number)

(973) 684-5999 (Work Phone Number)

**Contact Address:** 

1 COLLEGE BLVD

Paterson, New Jersey 075051179

#### **Uploaded Attachments**

No attachments have been uploaded for this submittal.

### Report Details - Part A

#### **Public Complex Information**

Team member responsible for completing the report:	Thomas V. Lyons, Jr.
Team member email address:	tlyons@pccc.edu

#### **Population Information**

1. Report the population at the Public Complex usually present at	
	200

If the Public Complex is a military base, hospital, prison, or general administration facility, include all employees, military personnel, and residents (including patients or prisoners). If the Public Complex is a college or university campus, include all faculty, employees, and full-time students.

Note "Employees" includes individuals who work at the Public Complex regardless of whether

1: they are paid by the Public Complex, or by another governmental, private, or nonprofit entity.

Note You do not have to count any individual more than once. For example, a full-time university student who is also a university employee may be counted as one individual. 2:

Stormwater	Pollution	Prevention	Plan
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1. Have you revised your Stormwater Pollution Prevention Plan to incorporate changes required by the renewal permit?	Yes	
2. Date the SPPP was revised:	10/09/2007	

### **Public Notice**

1. Are you complying with applicable State and local public notice		
requirements when providing for public participation in the		
development and implementation of your stormwater program?	Yes	

## Post-Construction Stormwater Management in New Development and Redevelopment

1. For major development on property that you own or operate, are you ensuring compliance with the applicable design and performance standards established under N.J.A.C. 7:8?	Yes
2. Are you ensuring adequate long-term operation and maintenance of stormwater BMPs on property that you own or operate?	Yes
3. For storm drain inlets that you install, are you complying with the standard set forth in Attachment C of the permit to control passage of solid and floatable materials?	Yes
4. Between January 1, 2019 and December 31, 2019 has your Public Complex begun construction for any new development and/or redevelopment project that meets the definition of major development?	
If your Public Complex has begun construction for any new development and/or redevelopment project that meets the definition of major development you must upload the New Development Project Summary Checklist.	Yes

### Report Details - Part B

## Storm Drain Inlet Labeling (All Public Complexes)

1. Have you established a storm drain inlet labeling program?	Yes
2. Indicate the percentage or number of sectors labeled to date:	100%
3. Other Amount:	
4. Is your Public Complex maintaining the labels (i.e. replacing and/or repainting)?	Yes
5. Is your Public Complex a college, university or military base?	Yes

# Local Public Education Program (Colleges, Universities, and Military Bases only)

Have you developed a Local Public Education Program?	Yes
2. Did your Public Complex distribute an educational brochure?	Yes
3. Date (between January 1, 2019 - December 31, 2019) that your Public Complex distributed an Educational Brochure:	04/22/2019
4. Method of distribution:	Information Kiosak at building entrance.
5. Did your Public Complex conduct an educational event?	Yes
6. Date (between January 1, 2019 - December 31, 2019) that your Public Complex conducted an Annual Education Event:	04/22/2019
7. Description of the Event:	Annual Earth Day Event.

## Improper Disposal of Waste

## Have you adopted and are you enforcing a regulatory mechanism for:

1. Pet Waste Control:	Yes
2. Date adopted:	04/09/2007
3. Litter Control:	Yes
4. Date adopted:	04/09/2007
5. Improper Disposal of Waste Control:	Yes
6. Date adopted:	04/09/2007
7. Wildlife Feeding Control:	Yes
8. Date adopted:	04/09/2007
9. Illicit Connection Control:	Yes
10. Date adopted:	04/09/2007
11. Refuse Container/Dumpster Control:	Yes
12. Date adopted:	05/10/2010
13. Status of these regulatory mechanisms:	
14. Method(s) of enforcement (e.g., fines; warnings; employee, student, or military disciplinary actions; ejection from the Public Complex; additional signs; etc.):	Signs posted, Warnings Issued, Disciplinary Actions.

## Vegetative Waste/Collection Program

1. Have you developed a vegetative waste collection program?	N/A - no vegetative waste
2. Does the Public Complex perform yard waste pickups?	N/A - no homes where

ľ	residents maintain yards
	vards

# MS4 Outfall Pipe Mapping

1. Have you completed the MS4 outfall pipes mapping?	N/A - we do not have any outfalls
2. Date completed:	
3. Number of outfall pipes within the Public Complex:	0
4. Number of outfall pipes mapped:	0

## Report Details - Part C

# **Illicit Connection Elimination Program**

Have you completed an illicit connection inspection for all outfall pipes?	N/A - we do not have any outfalls
2. Total number of outfall pipes physically inspected during this reporting period:	0
3. Number of outfalls found to have an illicit connection during this reporting period:	0
4. Number of illicit connections eliminated during this reporting period:	0
5. Number of illicit connections found during that period to emanate from another entity:	
Please attach, in a format provided by the Department, a list of all outfalls found to have an illicit connection since the inception of the program. The list must include the outfall location, receiving water body, source of illicit connection and the date the illicit connection was eliminated.	0

## Street Sweeping Program

1. Were all required streets swept?	N/A - no streets required to be swept
2. What was the total number of miles swept?	

Please list the total amount of materials collected for each month since January 1, 2019, and indicate the unit of measurement used to report these materials.

8. May:  9. June:  10. July:		
10 July:		
To: July,		
11. August:		
12. September:		
13. October:		
14. November:		
15. December:		
16. Total (The Total will be displayed in ton units. If you have selected cubic yards as your reporting unit of measurement, be aware that the total will be converted to tons, 1.053 cubic yards = 1 ton.):		
17. If reporting zero (0) for a month above, please explain:		
Storm Drain Inlet Retrofitting		
repairing, reconstruction or alterations retrofitted or replaced to	/A - no paving that equired storm drain let retrofitting	
2. How many storm drain inlets were retrofitted?		
Stormwater Facility Maintenance		
Stormwater facilities include, but are not limited to, catch basins, detention basins, filter strips, riparian buffers, infiltration trenches, sand filters, constructed wetlands, wet basins, bioretention systems, low flow bypasses and stormwater conveyances. Please keep an inventory of stormwater facilities indicating type, function and location in a format provided by the Department onsite and available for inspection or upon request.		
1. Have you developed a Stormwater Facility Maintenance Program?	es	
Stormwater Facilities		
1. Were all stormwater facilities that you operate inspected?	es	
2. Were any found to be in need of cleaning or repair in order to function properly?	es	
3. Was the cleaning performed?	es	
	/A - no repairs eeded	
5. Describe repair(s) or if repairs have not yet been made, provide a schedule for the repair(s):		

#### Catch Basins

1. Total number of catch basins that you operate:	15
2. Total number of catch basins inspected:	15
3. Total number of catch basins cleaned:	15
4. Amount of materials removed from catch basins:	2
5. Units:	Cubic yards

### Report Details - Part D

## **Outfall Pipe Stream Scouring Remediation**

For all outfall pipes undergoing remediation through this program, please attach additional page(s) as necessary indicating the location of the outfall pipe (including the alphanumeric identifier), the repair start date and the repair complete date.

N/A - we do not have any outfall pipes

### De-icing Material and Sand Storage

1. Do you have a permanent structure for de-icing material storage?	N/A - we do not store de-icing materials
	N/A - no sand stored outdoors

#### **Fueling Operations**

1. Are you implementing Standard Operating Procedures for vehicle fueling and receiving of bulk fuel deliveries at maintenance yard	
•	N/A - no fueling

#### Vehicle Maintenance

1. Are you implementing Standard Operating Procedures for vehicle	
maintenance and repair activities at maintenance yard operations?	or repairs

## **Good Housekeeping Practices**

1. Are you implementing Good Housekeeping Practices for all materials or machinery listed in the Inventory Requirements for Public Complex Maintenance Yard Operations (including maintenance | N/A - no materials or activities and ancillary operations)?

machinery

# **Equipment and Vehicle Washing**

Has your Public Complex implemented measures to properly handle the discharge of equipment and vehicle wash wastewater from your municipal maintenance yard operations?	Yes
2. Please indicate which option you implemented to eliminate the unpermitted discharge:	Ceased the discharge (no longer wash onsite)
3. Date the management measure was implemented:	03/01/2009
4. What is your NJPDES permit number that authorizes the discharge of vehicle and equipment wash wastewater?	
5. Are you maintaining records of vehicle and equipment washing?	N/A - we do not wash our vehicles

# **Annual Employee Training**

1. Did you conduct an annual employee training program for appropriate employees on appropriate topics (e.g., police officers trained on ordinances)?	Yes
2. List date(s) of employee training:	Various dates throughout the year.

# Report Details - Part E

## Sharing of Responsibilities

1

# **Incidents of Non-Compliance**

1. Did your Public Complex have any incidents of non-compliance?	No
2. Identify the steps being taken to remedy the noncompliance and to prevent such incidents from recurring. (If the text box is not large enough to complete this section, please provide your report as an attachment and upload it on the next screen. Please reference the attachment in the textbox.)	